

**IN THE UNITED STATES DISTRICT COURT  
FOR THE NORTHERN DISTRICT OF MISSISSIPPI  
OXFORD DIVISION**

**KATHY SUE CAMACHO**

**PLAINTIFF**

**VS.**

**CIVIL ACTION NO. 3:19-cv-00195-DMB-JMV**

**DEPARTMENT OF JUSTICE OF  
OXFORD MISSISSIPPI, ET AL.**

**DEFENDANTS**

**ORDER**

This matter is before the Court, *sua sponte*, to order the *pro se* Plaintiff, Kathy Sue Camacho, to supplement her motion to proceed *in forma pauperis* [2], failing which full payment of the filing fee will be required before this action may proceed.

Pursuant to 28 U.S.C. § 1915(a), a Court may allow a civil action to commence without the prepayment of the required filing fee, provided that the individual pursuing such action files an affidavit “that includes a statement of all assets such [person] possesses that the person is unable to pay such fees or provide security therefor.” The application before the Court solely lists Plaintiff’s income and rent amount. It does not list plaintiff’s assets or any other required financial information. Thus, it is not possible for the Court to determine Ms. Camacho’s ability to pay the filing fee.

**IT IS THEREFORE ORDERED** that within fourteen (14) days of this date, Ms. Camacho must supplement her motion with a completed copy of the attached application. Ms. Camacho is warned that failure to fully comply with this order may lead to denial of her motion to proceed *in forma pauperis*.

**SO ORDERED** this, September 4, 2019.

/s/ Jane M. Virden

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**UNITED STATES MAGISTRATE JUDGE**

Attachment:

# UNITED STATES DISTRICT COURT

for the

\_\_\_\_\_ District of \_\_\_\_\_

\_\_\_\_\_  
*Plaintiff/Petitioner*

v.

\_\_\_\_\_  
*Defendant/Respondent*

)  
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)  
)

Civil Action No.

## APPLICATION TO PROCEED IN DISTRICT COURT WITHOUT PREPAYING FEES OR COSTS (Short Form)

I am a plaintiff or petitioner in this case and declare that I am unable to pay the costs of these proceedings and that I am entitled to the relief requested.

In support of this application, I answer the following questions under penalty of perjury:

1. *If incarcerated.* I am being held at: \_\_\_\_\_.

If employed there, or have an account in the institution, I have attached to this document a statement certified by the appropriate institutional officer showing all receipts, expenditures, and balances during the last six months for any institutional account in my name. I am also submitting a similar statement from any other institution where I was incarcerated during the last six months.

2. *If not incarcerated.* If I am employed, my employer's name and address are:

My gross pay or wages are: \$ \_\_\_\_\_, and my take-home pay or wages are: \$ \_\_\_\_\_ per  
(specify pay period) \_\_\_\_\_.

3. *Other Income.* In the past 12 months, I have received income from the following sources (check all that apply):

- |  |                              |                             |
|--|------------------------------|-----------------------------|
| (a) Business, profession, or other self-employment | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| (b) Rent payments, interest, or dividends          | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| (c) Pension, annuity, or life insurance payments   | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| (d) Disability, or worker's compensation payments  | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| (e) Gifts, or inheritances                         | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| (f) Any other sources                              | <input type="checkbox"/> Yes | <input type="checkbox"/> No |

If you answered "Yes" to any question above, describe below or on separate pages each source of money and state the amount that you received and what you expect to receive in the future.

4. Amount of money that I have in cash or in a checking or savings account: \$ \_\_\_\_\_.

5. Any automobile, real estate, stock, bond, security, trust, jewelry, art work, or other financial instrument or thing of value that I own, including any item of value held in someone else's name *(describe the property and its approximate value)*:

6. Any housing, transportation, utilities, or loan payments, or other regular monthly expenses *(describe and provide the amount of the monthly expense)*:

7. Names (or, if under 18, initials only) of all persons who are dependent on me for support, my relationship with each person, and how much I contribute to their support:

8. Any debts or financial obligations *(describe the amounts owed and to whom they are payable)*:

*Declaration:* I declare under penalty of perjury that the above information is true and understand that a false statement may result in a dismissal of my claims.

Date: \_\_\_\_\_

\_\_\_\_\_  
*Applicant's signature*

\_\_\_\_\_  
*Printed name*